FOR BOAR	D USE ONLY
Amount S	ubmitted
Date	
Receipt #	



FOR BOARD USE ONLY	
Certificate Number	
Date Issued	
Applicant No.	

## GEORGIA BOARD OF ATHLETIC TRAINERS

237 Coliseum Drive Macon, Georgia 31217 Phone: (404) 424-9966

http://sos.ga.gov/index.php/licensing/plb/7

## APPLICATION FOR LICENSURE – REACTIVATION ATHLETIC TRAINER

Application Fee: \$50.00 (non-refundable & non-transferable)

Checks returned for insufficient funds will be assessed a service charge pursuant to O.C.G.A. § 16-9-20.

Please return application in a 9X12 envelope, unfolded and unstapled.

	APPL	LICANTINFORMATION	ON	
Name:	First	Middle	Maiden	
Name in which license wa				
Last	First	Middle	Maiden	
	D. Box, not acceptable)	Apt. No. City	State	Zip Code
Mailing Address if different Home Address:  Street	ent than Apt.	No. City	State	Zip Code
TELEPHONE NUMBER (	DAY)	TELEPHONE NUME	BER (EVENING)	
DATE OF BIRTH:		SOCIAL SEC	CURITY NUMBER:	
	o contact you so that y red with any third part a if you are a military	your application can be y.	processed in the most e	efficient manner. Your

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#### INSTRUCTIONS:

- Please type or print clearly. Complete application in ink. NOTE: APPLICATIONS ARE VOID AFTER 60 DAYS FROM THE DATE OF NOTIFICATION OF APPLICATION DEFICIENCIES. IF ALL REQUIRED SUPPLEMENTAL DOCUMENTS ARE NOT RECEIVED WITHIN THAT 60-DAY WINDOW YOUR APPLICATION WILL BE WITHDRAWN AND YOU WILL NEED TO RE-APPLY. Board Rule, Chapter 53-6-.04 (4) provides: "The Board will reactivate a license upon receipt of the following:
  - (a) Application for Reactivation;
  - (b) Evidence of completion of six hours of continuing education approved by the Board for each year the license was inactive. However, no proof of continuing education will be required of an applicant for reactivation who during the period that the Georgia license was inactive: (1) practicing with an active license in a jurisdiction that requires continuing education to maintain that license; or (2) practicing with BOC certification in a jurisdiction that has licensing requirement.
- If you are a military spouse or a transitioning service member of the United States armed forces (including the National Guard) and you wish to qualify for expedited processing you must meet the requirements of O.C.G.A. § 43-1-34.

NOTE: Reactivation cannot be approved if the license has been on inactive status for five years or more.

#### PART 1 – PROFESSIONAL BACKGROUND

If you answer yes to any of the following questions, please attach a letter of explanation. For questions 2, 3, 4, 5, 6 and 7 submit the letter of explanation and a certified copy of the <u>official</u> document that indicates the final disposition of the action, (such as court indictment, police record, certified warrant/court dismissal, verdict of first offender treatment). You are expected to read each question carefully, completely and <u>update</u> the information, if necessary. You will be asked to certify under oath that the answers are true and correct. Failure to answer these questions truthfully and to update the information may be grounds for denial of your application or other disciplinary action against you.

□ Yes □ No 1.	Do you now hold or have you ever held a license as an Athletic Trainer or any other 3 professional license in any other state? If yes, complete the following. <u>License verifications ar required if you have ever held ANY professional license in another state, regardless of current status. If you require more space to list all of your licenses, write them on another piece of paper and attach it to the application:</u>
	State License No
	Date Issued Expiration
□ Yes □ No 2.	Have you ever had a license to practice any profession revoked, suspended or annulled or otherwise disciplined, including by private order? <i>If yes, submit a letter of explanation and a certified copy of the official document that indicates the final disposition of the action.</i>
□ Yes □ No 3.	Have you ever been denied issuance of or, pursuant to disciplinary proceedings, refused renewal of a license by any Board or Agency in Georgia or any other state? If yes, submit a letter of explanation and a certified copy of the official document that indicates the final disposition of the action
□ Yes □ No 4.	Have you ever failed to renew any license or certification issued to you by any Board or Agency in Georgia or any other state because of pending disciplinary action or investigation? If yes, submit a letter of explanation and a certified copy of the official document that indicates the final disposition of the action.
□ Yes □ No 5.	Other than minor traffic violations, have you ever been arrested or convicted of a felony or misdemeanor? (DWI/DUI are not considered minor traffic violations)  For purposes of this questions, a "conviction" includes a finding of verdict of guilty, a plea of guilty, or a plea of nolo contendere in a criminal proceeding regardless of whether an appeal of the conviction has been sought, and also includes any adjudication of guilt or sentence withheld or not entered pursuant to the provisions of Code Sections § 42-08-64, relating to first offenders, or any comparable rule or statute. If yes, submit a letter of explanation and a certified copy of the official document that indicates the final disposition of the action.

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☐ Yes☐ No 6. Have you been the defendant in a malpractice suit and either entered into a settlement agreement or paid court awarded expenses?
☐ Yes ☐ No 7. Are you currently unable to practice safely as a result of use of alcohol or other drugs?
☐ Yes ☐ No 8. Have you had Medicaid and/or Medicare privileges revoked or restricted?
PART 2 – AFFIDAVIT OF APPLICANT
APPLICANT AFFIDAVIT:
I hereby swear and affirm that all information provided in this application is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws and rules and regulations of the Georgia State Board of Athletic Trainers and I agree to abide by these laws and rules, as amended from time to time.
By signing this application, electronically or otherwise, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:
1) I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on pages 5 & 6 of this application.
2) I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.
In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia Board of Athletic Trainers_and/or criminal prosecution.
Signature of Applicant Date
Sworn to and subscribed before me thisday of, 20
Notary Public
My Commission Expires:
NOTARY SEAL

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# Georgia Bureau of Investigation Georgia Crime Information Center

### **Consent Form**

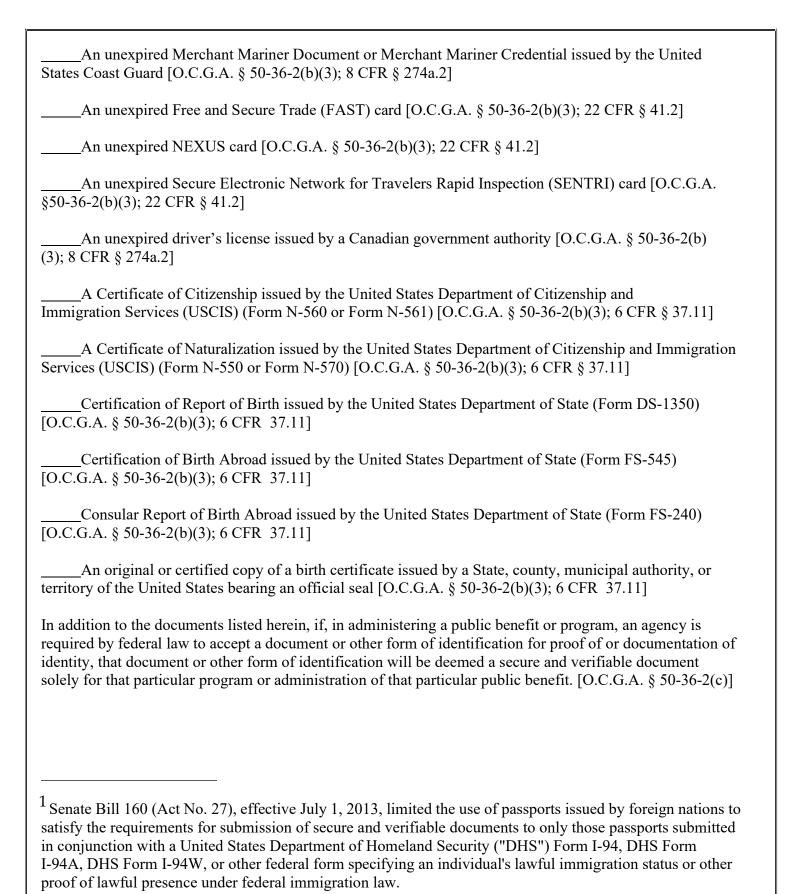
I hereb	y authorize	GEORGIA BOARD	OF ATHLETIC TRAINERS	to receive any
_	a criminal history I justice agency i	•	ng to me which may be in the files of a	ny state or local
Full Na	me (print)			
Addres	S			
Sex	Race	Date of Birth	Social Security Number	
		cknowledge that I have bee Act Statement (Title 28 Unit	en informed of the Non-Criminal Justice red States Code § 534).	Applicant's Privacy
Signatu	ıre		Date	
Spe	ecial employme	nt provisions (check if ap	plicable):	
	Employme	ent with mentally disabled (F ent with elder care (Purpose ent with children (Purpose co	code 'N')	
You	u must select o	ne of the four options belo	ow for the number of days for author	rization:
	This authorization	1 90 2 180 3 days from 4. I,	, give cor m periodic criminal background checks	nsent to the above s for the duration of m

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RETURN THIS FORM ALONG WITH A COPY OF YOUR APPROPRIATE DOCUMENTATION.  LICENSE NO:
(Printed Name of Applicant)
Secure and Verifiable Documents Under O.C.G.A. § 50-36-2  Issued October 28, 2016, by the Office of the Attorney General, Georgia
The Illegal Immigration Reform and Enforcement Act of 2011 ("IIREA"), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that "[n]ot later than August 1, 2011, the Attorney General sha provide and make public on the Department of Law's website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.
The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.
An unexpired United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An unexpired United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An unexpired driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
An unexpired identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
A unexpired tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: <a href="http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm">http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm</a> [O.C.G.A.
§ 50-36-2(b)(3); 8 CFR § 274a.2]
An unexpired United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36- 2(b)(3); 8 CFR § 274a.2]
An unexpired Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36- 2(b)(3); 8 CFR § 274a.2]

\_\_\_\_A unexpired passport issued by a foreign government, provided that such passport is accompanied by a United States Department of Homeland Security (DHS") Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual's lawful immigration status or other proof of lawful presence under federal immigration law<sup>1</sup> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

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